Name in Full

Certificate of Death

Sarah Burrell

Died at Cumberland (Town) Allegany (County) MARYLAND

Date 1899 July 4 | Age Y. 5 M. D. | Native of Cumberland | Occupation Infant

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ Single | ~~Widowed~~ | ~~Divorced~~ | ~~Number of children born~~

Husband of Wife —

Father's Name Wm. Burrell

Mother's Name E. V. Burrell

Cause of Death: Primary — Cholera Infantum — How long sick 3 days

Immediate — Exhaustion

~~Accident, Suicide, Homicide~~

Reported by E. L. Duke M.D.

Address Cumberland Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65966

Name in Full

Certificate of Death

Annie Eshenbacher

Died at Town Cumberland County Alleg. MARYLAND

Date 1899 Month 7 Day 17 Age Y. — M. 2 D. 15 Native of Md Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name Albert J. Eshenbacher Mother's Name Maggie Eshenbacher

Cause of Death Primary Cholera Infantum 2 How long sick 4 days

Immediate Inanition Accident, Suicide, Homicide

Reported by T. H. Stansbury

Address Cumberland Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Conrad Handel

Died at Town: Cumberland County: Allegany MARYLAND

Date 1899 Month: July Day: 22 Age Y. 75 M. 5 D. 27 Native of Germany Occupation Waltzman

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ Divorced Number of children living 3

Husband / Wife of Mary Handel

Father's Name Inglehart Handel Mother's Name

Cause of Death: Primary General decay 141 How long sick

Immediate Exhaustion ~~Accident Suicide Homicide~~

Reported by J. Powell

Address Cumberland Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 69068

Name in Full

Matthews

Certificate of Death

Died at Town Cumberland County Allegany Co MARYLAND

Date 189 9 Month July Day 12 Age Y. 7 M. 8 D. Native of Cumberland Occupation —

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ Divorced ~~Number of children living~~

Husband / Wife of

Father's Name W. F. Matthews Mother's Name Mrs W. F. Matthews

Cause of Death — Primary: Cholera Infantum — How long sick 1 wk

Immediate: Exhaustion 82 — ~~Accident, Suicide, Homicide~~

Reported by Chas L Broadrup MD

Address 160 Va ave

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 58968

Name in Full: James Nichols

Certificate of Death

Died at Town: Lonaconing County: Allegany MARYLAND

Date 1899 Month: July Day: 21 | Age Y. 67 M. 11 D. 11 | Native of England | Occupation Miner

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ ~~Widow~~ ~~Widower~~ | Number of children living 8

Husband ~~Wife~~ of Elizabeth Chedwick

Father's Name Joseph Nichols | Mother's Name Elizabeth Lloyd

Cause of Death: Primary 145C | How long sick June

Immediate Crushed in Jackson | Accident, ~~Suicide, Homicide~~

Reported by L D Skilling M.D.

Address Lonaconing Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full | Certificate of Death

Pauline Thares

Died at Town: Cumberland County: Allegany MARYLAND

Date 1897 Month: July Day: 15 | Age Y. 1 M. 1 D. 12 | Native of: Wva | Occupation: child

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ Number of children living 2

Husband / Wife of —

82

Father's Name: Perry Thares | Mother's Name: Pauline Thares

Cause of Death: Primary: Cholera Infantum | How long sick: 3 days

Immediate: Meningitis Cerebrum | ~~Accident, Suicide, Homicide~~

Reported by: J Jones Oliver

Address: Cumberland Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65988

Name in Full Eliza Nicholas Wilkes

Certificate of Death

Died at Town Burton County Allegany MARYLAND

Date 1899 Month July Day 2 | Age Y. 65 M. 3 D. 4 | Native of England | Occupation H. W.

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | Widow ~~Widower~~ | ~~Divorced~~ | Number of children living 6

~~Husband~~ Wife of Jas. Wilks

Father's Name Joseph Nicholas | Mother's Name Elizabeth Lord Nicholas

Cause of Death: Primary Senile Gangrene | How long sick 5 Weeks

Immediate

124

~~Accident, Suicide, Homicide~~

Reported by S. A. Bowser M. D.

Address Burton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, BOSTON

Name in Full: Cathaleen Witt

Certificate of Death

Died at: Town: Mt Savage — County: Allegany — MARYLAND

Date 1899: Month: July — Day: 26 — Age: ~~Y~~ M. 6 D. — Native of: Md — Occupation: Infant

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife: — — — —

Father's Name: Bruj. F. Witt

Mother's Name: Julia A Davison

Cause of Death — Primary: Cholera Infantum — How long sick: 24

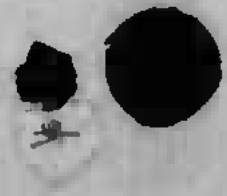
Immediate: Convulsions 72 — ~~Accident, Suicide, Homicide~~

Reported by: A. Hawkins M.D.

Address: Mt Savage

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968



Name in Full Pennington

Certificate of Death

Died at Town Cumberland County Allegany MARYLAND

Date 1899 Month July Day 28 Age Y. 7 M. – D. – Native of Cumberland Occupation Infant

~~Male~~ Female White ~~Colored~~ ~~Married~~ ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

~~Husband~~ Wife of

Father's Name Wm Penning Mother's Name Maggie Pennington

Cause of Death: Primary Cholera Infantum How long sick 4 days

Immediate Meningitis 82

~~Accident, Suicide, Homicide~~

Reported by A. J. Price

Address Cumberland Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full: William Stitcher

Certificate of Death

Died at — Town: Cumberland — County: Allegany — MARYLAND

Date 1899 — Month: July — Day: 4 — Age: Y. 21 M. D. — Native of: Md — Occupation: Butcher

Male — ~~Female~~ — White — ~~Colored~~ — ~~Married~~ — Single — ~~Widow~~ — ~~Widower~~ — ~~Divorced~~ — ~~Number of children living~~

Husband / Wife of

Father's Name: Andrew Stitcher

Mother's Name: Mary Stitcher

Cause of Death — Primary: Pulmonary Phthisis — How long sick: 12 months

Immediate: Exhaustion 22a — ~~Accident, Suicide, Homicide~~

Reported by: J. James Wilson

Address: Cumberland Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full Philip S. Tomlinson

Certificate of Death

Died at Town Frostburg County Allegany MARYLAND

Date 189 9 Month 7 Day 10 | Age Y. 43 M. D. | Native of J | Occupation

Male ~~Female~~ | White ~~Colored~~ | Married Single | Widow Widower | Divorced | Number of children living

Husband of

Wife

Father's Name

Mother's Name

Cause of Death — Primary 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Mining Journal 7-15-

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 75868